PTO/SB/17 (10-07)
Approved for use through 06/30/2010. OMB 0651-0032

Under the Paperwork Red	uction Act of 1995,	, no person are re	quired to			n of inform		s a valid OMB co	ontrol number		
Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).					Complete if Known						
					tion Nun	nber	09/910,662-Conf. #2628				
FEE TRANSMITTAL				Filing Date			July 20, 2001				
				First Named Inventor			Ziya Aral				
For FY 2008					er Name		N. Tran				
Applicant claims small entity status. See 37 CFR 1.27				Art Unit			2151				
TOTAL AMOUNT OF PAYMENT (\$) 1,030.00				Attomey Docket No. DAT-			DAT-0002				
METHOD OF PAYME	NT (check all ti	nat apply)									
Check Credit Card Money Order None Other (please identify):											
x Deposit Account Name: Rader, Fish									er PLLC		
For the above-ide			irector is	hereby			-				
	s) indicated be!			,	_	•	ndicated below,		filina fee		
	additional fee(s		ments o	f 5	≓ ĭ	` '	payments				
fee(s) under	37 CFR 1.16 a			Ľ		uny 000					
FEE CALCULATION											
1. BASIC FILING, SEARC	•			A D C L I	TEC	EVARA	INATION FEES	•			
		G FEES Small Entity	3E/	ARCH F Sma	Il Entity	EXAM	Small Entity	<b>)</b>			
Application Type	Fee (\$)	Fee (\$)	Fee (\$		ee (\$)	Fee (\$		Fees Pa	id (\$)		
Utility	310	155	510		255	210	105				
Design	210	105	100		50	130	65				
Plant	210	105	310		155	160	80				
Reissue	310	155	510		255	620	310				
Provisional	210	105	0		0	0	0				
2. EXCESS CLAIM FEES		•						<u>s</u>	mall Entity		
Fee Description								Fee (\$)	Fee (\$)		
Each claim over 20 (inclu	- ·							50	25		
Each independent claim of		g Reissues)						200	100		
Multiple dependent claim	S			•				360	180		
<u>Total Claims</u> <u>Extr</u>	a Claims F	ee (\$)	Fee Paid (\$)				Multiple Depend				
-=	x		<u>.</u>			į	Fee (\$)	Fee Paid (\$)			
HP = highest number of total of			Eag I	onial (#)		_			-		
Indep. Claims Extr	<u>a Claims</u> <u>F</u> x	ee (\$) =	ree	Paid (\$)	<del></del>		-	•			
HP = highest number of indep		for, if greater than	n 3.		<del></del>						
3. APPLICATION SIZE FI	EE										
If the specification and o	 Irawings excee	d 100 sheets o	f paper	(excludi	ng electr	onically	filed sequence o	r computer			
listings under 37 CFF sheets or fraction the	(1.52(e)), the a	application siz	e fee di	ie is \$26	0 (\$130 t	for small	entity) for each	additional 50			
	Extra Sheets	Number o				ction then	eof Fee (\$)	Fee Pa	aid (\$)		
- 100 = _								=			
4. OTHER FEE(S)		·==		,				Fees P	aid (\$)		
Non-English Specifica	tion, \$130 fee	e (no small en	ity disc	ount)							
Other (e.g., late filing		-	-		3			1,03	0.00		

Other (e.g., late filing surcharge): 1403 Request for oral hearing						1,030.00		
SUBMITTED BY			I Ri	egistration No.		I	(200) 055 0750	
Signature	-//			ittomey/Agent)	40,290	Telephone	(202) 955-3750	
Name (Print/Type)	Christopher M	Tobin	$\sim$			Date	May 1, 2008	